| 1 | STATE OF OKLAHOMA |
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| 2 | 1st Session of the 58th Legislature (2021) |
| 3 | COMMITTEE SUBSTITUTE |
| 4 | FOR ENGROSSED SENATE BILL NO. 689 By: Pugh of the Senate |
| 5 | and |
| 6 | Miller of the House |
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| 9 | COMMITTEE SUBSTITUTE |
| LO | An Act relating to the Oklahoma Health Care |
| 1 | Authority; amending 63 O.S. 2011, Section 5009.2, which relates to the Advisory Committee on Medical |
| 12 | Care for Public Assistance Recipients; modifying and limiting membership; limiting duration of |
| L3 | appointments; specifying duration of chair and vice- chair terms; stating policy; prohibiting certain |
| L 4 | Oklahoma Health Care Authority contracts from having certain negative impacts; requiring certain contracts |
| L5 | to purchase transportation through Oklahoma public transit systems and to respect certain jurisdictional |
| L 6 | boundaries; requiring certain contracted entities to collaborate with the entity implementing a statewide |
| L7 | mobility management program; listing provider requirements; providing for codification; and |
| L8 | providing an effective date. |
| L 9 | |
| 20 | BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: |
| 21 | SECTION 1. AMENDATORY 63 O.S. 2011, Section 5009.2, is |
| 22 | amended to read as follows: |
| 23 | Section 5009.2 A. The Advisory Committee on Medical Care for |
| 24 | Public Assistance Recipients created by the Oklahoma Health Care |

Authority, pursuant to 42 Code of Federal Regulations, Section

431.12, for the purpose of advising the Authority about health and

medical care services, shall include among its membership of no more

than fifteen (15) the following:

- 1. Board-certified physicians and other representatives of the health professions who are familiar with the medical needs of low-income population groups and with the resources available and required for their care. The Advisory Committee shall, at all times, include at least one physician from each of the six classes of physicians listed in Section 725.2 of Title 59 of the Oklahoma Statutes; provided, however, All such physicians and other representatives of the health professions shall be participating providers in the State Medicaid Plan;
 - 2. Members of consumers' groups, including, but not limited to:
 - a. Medicaid recipients, and

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- b. representatives from each of the following consumer organizations which represent the interests of:
 (1) people who are economically disadvantaged,
 - (2) children,
 - (3) the elderly,
 - (4) people with mental illness,
 - (5) people who are developmentally disabled, and
 - (6) people with alcohol or substance abuse problems including a member representing nursing homes, a

| 1 | member representing people who are |
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| 2 | developmentally disabled, and a member |
| 3 | representing one or more behavioral health |
| 4 | <pre>professions;</pre> |
| 5 | 3. The Director of the Department of Human Services <u>, or</u> |
| 6 | designee; and |
| 7 | 4. The Commissioner of Mental Health and Substance Abuse |
| 8 | Services, or designee; |
| 9 | <u>5.</u> A member approved and appointed by the Oklahoma Academy of |
| 10 | Pediatries a state organization or state chapter of a national |
| 11 | organization of pediatricians dedicated to the health, safety and |
| 12 | well-being of infants, children, adolescents and young adults, who |
| 13 | shall: |
| 14 | a. monitor provider relations with the Oklahoma Health |
| 15 | Care Authority, and |
| 16 | b. create a forum to address grievances; and |
| 17 | 6. A member who is a member or citizen of a federally |
| 18 | recognized American Indian tribe or nation whose primary tribal |
| 19 | headquarters is located in this state. |
| 20 | Beginning on January 1, 2022, appointments made to the Advisory |
| 21 | Committee shall be for a duration not to exceed four (4) consecutive |
| 22 | calendar years. |
| 23 | B. The Advisory Committee shall meet bimonthly to review and |

Req. No. 8104 Page 3

make recommendations related to:

- 1. Policy development and program administration;
- 2. Policy changes proposed by the Authority prior to consideration of such changes by the Authority;
- 3. Financial concerns related to the Authority and the administration of the programs under the Authority; and
- 4. Other pertinent information related to the management and operation of the Authority and the delivery of health and medical care services.
- C. 1. The Administrator of the Authority shall provide such staff support and independent technical assistance as needed by the Advisory Committee to enable the Advisory Committee to make effective recommendations.
- 2. The Advisory Committee shall elect from among its members a chair and a vice-chair who shall serve one-year terms. A member may serve more than one (1), but not more than four (4), consecutive one-year terms as chair or vice-chair. A majority of the members of the Advisory Committee shall constitute a quorum to transact business, but no vacancy shall impair the right of the remaining members to exercise all of the powers of the Advisory Committee.
- 3. Members shall not receive any compensation for their services, but shall be reimbursed pursuant to the provisions of the State Travel Reimbursement Act, Section 500.1 et seq. of Title 74 of the Oklahoma Statutes.

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D. The Authority shall give due consideration to the comments and recommendations of the Advisory Committee in the Authority's deliberations on policies, administration, management and operation of the Authority.

- SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 5009.7 of Title 63, unless there is created a duplication in numbering, reads as follows:
- A. It is the policy of the State of Oklahoma that all state agencies with an interest in public transit should ensure their programs are in alignment with the Oklahoma Public Transit Policy Plan as mandated by Sections 322 through 324 of Title 69 of the Oklahoma Statutes and that state policy and program direction related to public transit and transportation should ensure a coordinated public transit network that meets the mobility needs of all Oklahomans in a safe, reliable, consistent, and economical manner.
- B. The Oklahoma Health Care Authority, in contracting for nonemergency medical transportation for Medicaid or SoonerCare participants, shall not allow any existing contract to have or award any new contract that will have a negative impact on the financial stability of the state's public transit network as envisioned by the Oklahoma Public Transit Policy Plan.
- C. The Oklahoma Health Care Authority shall direct any entity contracted to broker or schedule nonemergency medical transportation

for Medicaid or SoonerCare participants, whether such contract is between the entity and the Oklahoma Health Care Authority or is an entity subcontracted with an entity under contract with the Oklahoma Health Care Authority, to purchase participants' transportation through Oklahoma public transit systems, as defined by Sections 5307, 5310 and 5311 of Title 49 of the United States Code, in all instances where public transit services are available to meet the participants' needs in as cost-effective a manner as other transportation providers meeting the same state and federal regulations, safety and cleanliness standards, and education and training standards as prescribed in subsection E of this section. In purchasing such nonemergency medical transportation, the Oklahoma Health Care Authority and any contracted or subcontracted entity shall first respect the jurisdictional boundaries of such public transit systems as defined by the Office of Mobility and Public Transit at the Oklahoma Department of Transportation.

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D. Any entity contracted to broker or schedule nonemergency medical transportation for Medicaid or SoonerCare participants, whether such contract is between the entity and the Oklahoma Health Care Authority or is an entity subcontracted with an entity under contract with the Oklahoma Health Care Authority, shall reasonably collaborate with the entity implementing a statewide mobility management program as envisioned by the Oklahoma Public Transit Policy Plan and recognized by the public transit agencies in the

state to ensure such trips coordinate with public transit services and human services transportation through the recognized statewide mobility management program.

E. In order for any public transit provider or transportation company to provide nonemergency medical transportation for Medicaid or SoonerCare participants, such provider or company shall have a valid certification from the Oklahoma Transit Association affirming that the provider or company has met certain education and training standards, adheres to all state and federal regulations, adheres to industry safety and cleanliness standards and is based in the State of Oklahoma.

SECTION 3. This act shall become effective November 1, 2021.

58-1-8104 LRB 04/08/21

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